



## Celebrating health excellence

The Canterbury Health System Quality Improvement and Innovation Awards recognise and celebrate those who have developed new ways of working to make it better for people who use our services.

The annual awards were held last Monday and every year the awards grow from strength to strength, with more entrants, and the results of their smart thinking on show. I was really pleased to see a number of quality improvements that have come about as a result of consumer feedback – through complaints and suggestions. This shows the power of the consumer voice, and our willingness to adapt and improve as a result.

I'm incredibly proud of the amazing efforts of everyone involved. I congratulate all of the entrants, finalists and winners in this year's awards and want to publicly acknowledge them for their continuous commitment and dedication to making our health system better. Canterbury is fortunate to have so many hard working and dedicated people throughout the system prepared to work in different ways to make it better for the people who use our services.

For those who entered and didn't make the finals this year, remember to measure everything you do. Capturing data provides a benchmark and helps demonstrate the impact of changes and improvements to systems. The judging panel emphasised this point in their summing up. Each of the winners had solid evidence of their initiative or improvement really making a difference.

The winner of this year's Supreme Award at the 2016 Canterbury Health System Quality Improvement and Innovation Awards, was the team behind Improving Care Processes for Patients with Possible Acute Coronary Syndrome. They have done an amazing job to improve patient care across the system. This entry also took out the Award in the *Best Value for Public Health System Resources* category.

The Improving Care Processes for Patients with Possible Acute Coronary Syndrome team developed an efficient way

of ruling out heart attacks in patients presenting with chest pain to ED. The traditional process to rule-out heart attack – also called Acute Myocardial Infarction (AMI) - required admission for up to 90 percent of patients. (This is despite only about 10-15 percent ultimately being diagnosed with a heart attack.) This exposes many patients to unnecessary risk through invasive testing and represents a large burden to the health system. The ICARE-ACS (Improving Care for Acute Coronary syndrome) team recognised this problem could be solved using an accelerated diagnostic pathway that enabled the decision to rule-out a heart attack much earlier (in the ED) rather than later in a ward. It's great to see this innovation has been shared and picked up widely. The project has resulted in safe and earlier discharge back to primary care for many more patients, reduced patient anxiety, a less crowded ED and reduced unnecessary admissions and healthcare spending.

I was thrilled to see the Pegasus Health 24Hour Surgery win the *Improved Health and Equity for All Populations* category with its Queue Portal. Managing patient flow is a never-ending challenge in health and it's great to see the Pegasus Health 24Hour Surgery making significant improvements to waiting times and the patient experience, particularly as they have had to accommodate 15,000 more patients over the past four years. The fact that the software involved cost around \$150 was an added bonus. Once again, smart thinking and making data visible has helped staff manage increased volumes of patients.

The winner for the *Improved Quality Safety and Experience of Care*, Improving Options for Management of Early Pregnancy Loss was a quality improvement-driven change that came about as a result of feedback from women and their families.

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The loss of an unborn child is a devastating time for expectant parents. Unfortunately it's not uncommon – with around 20 percent of pregnancies miscarrying. It's a really distressing event for women, their family / whānau and one that the Early Pregnancy Assessment Service at Christchurch Women's Hospital wanted to make easier for those experiencing it.

Women with problems during early pregnancy now only come to Christchurch Women's Hospital if hospital-based management is required. Most can be safely and successfully managed in the community. This has had a positive impact, and judging by feedback is much better for women and their families.

Everyone in the Canterbury Health System deserves recognition for putting patients at the centre of what they do to deliver the best care.

The full list of winners and runners up is below.

## 2016 Canterbury Health System - Quality Improvement and Innovation Award Winners

### Supreme Award Winner

Improving Care Processes for Patients with Possible Acute Coronary Syndrome

### Improved Health and Equity for all Populations

» Winner: 24 Hour Surgery Queue Portal

» Runner Up: Kiriata Māmā / Mothers Television

### Improved Quality, Safety and Experience of Care

» Winner: Improving Options for Management of Early Pregnancy Loss

» Runner Up: No Pain, More Gain: CoolSense pain numbing applicator

### Best Value for Public Health System Resources

» Winner: Improving Care Processes for Patients with Possible Acute Coronary Syndrome

» Runner Up: The Avastin Service Improvement Project

### Highly Commended

Satisfaction with Crisis Resolution: Consumer, Family, Referrer Perspectives

### Consumer Council Award

The Avastin Service Improvement Project

### Posters - Winner

Reducing Treatment Times for Obstructive Sleep Apnoea Using Multi-Patient Based Clinics

### Posters- Runner Up

Sustaining Health's National Treasures – Blood, Patients and Staff

### Posters- People's Choice

Making Medicines Education Memorable

I commend all the winners and runners up of this year's awards. I also take my hat off to the judging panel. It's a challenge to choose a single winning team from all of the entrants who are each making an outstanding contribution to improving our health system.

## More detail on each of the winners is below

### Supreme Award Winner

#### Improving Care Processes for Patients with Possible Acute Coronary Syndrome

Patients with chest pain or other symptoms suggestive of a heart attack are encouraged to seek medical attention urgently. As a result they are among the most common patient groups presenting to the Emergency Department (ED). The traditional process to rule-out heart attack (acute myocardial infarction, AMI) has required admission for up to 90 per cent of these patients. This is despite only about 10-15 per cent ultimately being diagnosed with AMI. This exposes many patients to unnecessary risk through invasive testing and represents a large burden on the health system.

The ICARE-ACS team recognised this problem could be solved using an accelerated diagnostic pathway (ADP) that enabled the decision to rule-out AMI to be made much earlier in the ED. The project has resulted in safe and earlier discharge back to primary care for many more patients, reduced patient anxiety, a less crowded ED and reduced unnecessary admissions and healthcare spending.



Above: The Supreme Award Winning team members.

### Improved Health and Equity for all Populations

#### Winner: 24 Hour Surgery Queue Portal

Managing patient flow became increasingly complex at the 24 Hour Surgery due to the increase in numbers and the facility changes made to accommodate them. The former practice management system (PMS) was able to order the queue by arrival time only, so working out which patient to see next was a challenge. As the result of a strong collaborative and quality focused development process, a queue portal tool has been developed to help manage patient flow. The clinical and reception team now have access to a tool that supports real time decision making and patient flow management.

#### Runner Up: Kiriata Māmā / Mothers Television

The CDHB Women's Health Service launched Kiriata Māmā / Mother's TV in October 2015. Empowering women is the philosophy behind its programming which is screening across Canterbury DHB Maternity Services. This local Quality Initiative provides 24 health-related parent-focused programmes, accessible to about 6000 women a year. Anecdotally women and staff have

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commented on how useful and informative the programmes are and a formal survey is underway, due to finish this month, which will provide more information from consumers.

### **Improved Quality, Safety and Experience of Care Winner: Improving Options for Management of Early Pregnancy Loss**

The early pregnancy assessment service (EPAS) at Christchurch Women's Hospital provides assessment and management for women who have early pregnancy problems. For women who require management of a miscarriage surgical management has been the most common option chosen. This involves a day case procedure under a general anaesthetic.

Women seen in EPAS said the options available did not meet their needs, with long wait times, repeated hospital visits and deferred procedures. Also, the acute surgical list was under pressure with increased demand. Between October 2014 and March 2016 a service was put in place where women with early pregnancy problems only come to Christchurch Women's Hospital if hospital-based management is required. The options allow most women to have treatment as an outpatient sooner.

These improvements have reduced the demand from EPAS on the acute surgical list and Canterbury DHB radiology service, and women have given positive feedback about the improved options.

### **Runner Up: No Pain, More Gain: CoolSense pain numbing applicator**

Across Child Health, children experience a number of potentially painful procedures including the placement of intravenous (IV) needles, which make many children fearful. Commonly, topical anaesthetic creams are used to numb the site of injection. This intervention has its own complications and associated anxieties which can lead to ineffective numbing of the skin, resulting in a painful experience for the child. The CoolSense Pain Numbing Applicator is a hand-held device that acts to cool and numb the site of injection. Post application, it takes only ten seconds to work before the injection can then be administered. The Children's Haematology and Oncology Centre (CHOC) have been trialling the CoolSense device for IV cannulation, blood collection, accessing implantable ports and for subcutaneous and intramuscular injections. CoolSense has produced a better experience for CHOC patients and families by reducing pain associated with treatment.

### **Best Value for Public Health System Resources Winner: Improving Care Processes for Patients with Possible Acute Coronary Syndrome**

**Runner Up: The Avastin Service Improvement Project**  
Since 2006, wet age-related macular degeneration (AMD) has been treatable with an injection of Avastin, if treated early. The rapidly increasing use of Avastin to treat diabetic macular changes and retinal vein occlusions, compounds the increasing demand for wet-AMD treatment in an ageing population. Until 2012 Avastin injections in Canterbury DHB were routinely given in theatre. An initial assessment of the injection service revealed underlying systemic problems of inadequate capacity, unsafe practices, unacceptable waiting times, and an unsatisfactory patient journey. As a result six 'areas of learning' were addressed and now, among other

improvements, 95 per cent of injections are given in the outpatients department.

### **Highly Commended Satisfaction with Crisis Resolution: Consumer, Family, Referrer Perspectives**

In 2014, the way help was provided to people with urgent mental health needs in Canterbury was changed. Following this change, it was important to evaluate the service satisfaction of consumers, their families and referrers to learn whether the new way of working was making a difference. A study was carried out of people discharged from Crisis Resolution over a five week period. The ultimate goal of the study was to improve Crisis Resolution for all key stakeholders. The results of the study showed high levels of satisfaction with Crisis Resolution. Staff manner and having effective treatment of sufficient duration were the most important issues for participants.

### **Poster Winner - Reducing Treatment Times for Obstructive Sleep Apnoea**

The Sleep Unit needed to address an overwhelming increase in demand for CPAP (Continuous Positive Airway Pressure) trials. It subsequently has reduced patient waiting times by performing CPAP trials in a group setting of up to eight consenting patients. The new way of working gave the unit the capacity to perform an additional 32 CPAP trials per month – which is a 53 percent increase.



Above: The winning poster team.

### **Poster Runner Up – Sustaining Health's National Treasures – Blood, Patients and Staff**

The Massive Transfusion Protocol (MTP) team provides clinical teams with a system that delivers fresh blood components (blood, fresh frozen plasma, cryoprecipitate and platelets) rapidly from the Blood Bank to the patient in an emergency. The team wanted to be sure they were delivering the right treatment to the patient in the right place at the right time by the right people who are supported by the right resources, promoting a patient-centric, responsive whole team approach. An incident of delayed delivery of emergency blood via the pneumatic transportation system was the catalyst to review the MTP activation process. The team wanted to find out if they were getting the communication and process basics right. A review of the MTP activation process identified opportunities for improvement and strategies for change have now been designed.

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**Poster – People’s choice award – Making Medicines Education Memorable**

Providing drug information is particularly challenging when it comes to children. The Pharmacy Department wanted to find a way to engage younger children with Cystic Fibrosis to learn about their medicines to help them take ownership for their medical therapy. The department developed a fun learning tool by modifying a well-known children’s game. The game was individualised for each child with Cystic Fibrosis. In all cases the child’s knowledge improved. There is potential for the game to be included in inpatient counselling for many other chronic conditions.

For more information on the entries go to the [Canterbury Health Systems Quality Improvement and Innovation Awards website](#). Staff can also view videos and submissions on the [staff intranet](#).

**HealthPathways and HealthInfo – clocking up some very impressive numbers**



**Care of up to 25 million people now guided by HealthPathways - created in Canterbury and localised around the globe**

The Canterbury Health System’s integrated way of working has gained interest from health leaders from New Zealand, Australia and the United Kingdom, and last week they came together in Canterbury to further their knowledge and collaboration as part of the HealthPathways International Conference held from 1-3 November.

The health regions committed to HealthPathways are responsible for the care of approximately 25 million people.

HealthPathways is an online tool that provides General Practice teams with information to consistently assess and manage medical conditions, as well as the criteria for requesting health services in each respective health region. The clinical pathways are developed and agreed by General Practitioners, hospital clinicians, and a wide range of other health professionals involved in the care of Canterbury patients all over the health system. It helps to improve the quality of care in the community and reduces the time people spend waiting, while supporting the delivery of more services closer to people’s own homes.

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HealthPathways was founded by Canterbury DHB and Streamliners in 2007. Canterbury developed the initial 500 pathways, agreed to share them with other members of the Community, and continues to review and update the core pathways based on current evidence and specialist opinion.

Use of HealthPathways has steadily increased to the point that 99% of general practitioners in Canterbury surveyed use it weekly in their practice, and 80% use it more than six times a week. Use is also high by practice nurses, pharmacists, physiotherapists, community nurses, and other allied health services.

**HealthPathways is already being used in the following health authorities, with many more enquiries currently being followed up:**

**New Zealand DHBs**

Southern; South Canterbury; Canterbury; Nelson-Marlborough; West Coast; Auckland Regional; Northland; Wairarapa; Hutt Valley; Capital & Coast.

**Australia Local Health Districts**

New South Wales: ACT and Southern; Central Coast; Hunter New England; Illawarra Shoalhaven; Mid & North Coast; South Western Sydney; Sydney; Sydney North; Western Sydney

Queensland: Cairns; Central Queensland; Wide Bay; Sunshine Coast; Mackay; Townsville

Western Australia

Victoria: Eastern Melbourne; Gippsland; Melbourne; Murray; Western Victoria

Tasmania

**United Kingdom**

South Tyneside – a local health authority serving around 150,000 people.

## The consumer-facing companion to HealthPathways is HealthInfo

### Canterbury Health System’s online health tool ‘a hit’

The HealthInfo website, designed to help people manage their health, is proving increasingly popular in Canterbury.

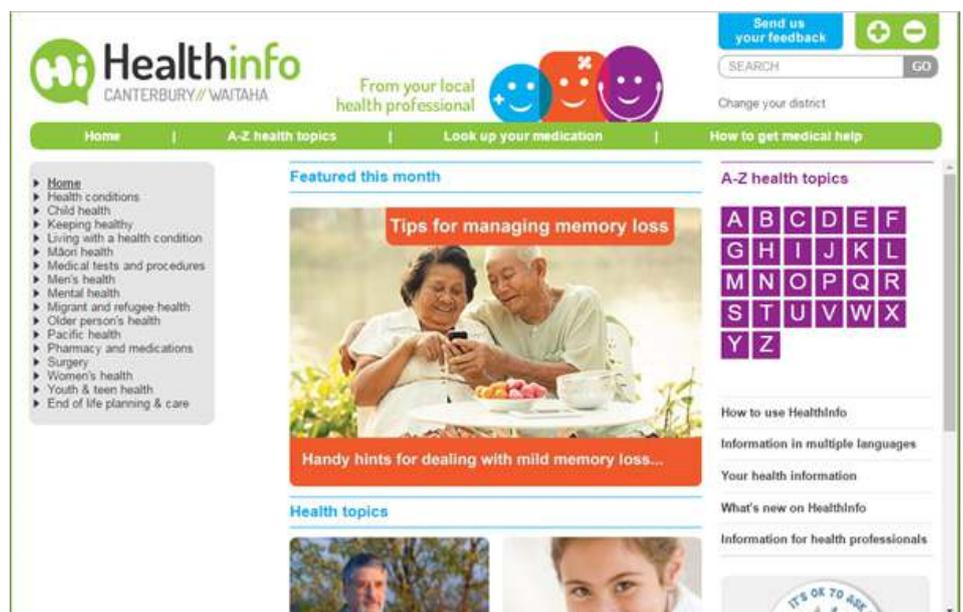
As the internet becomes more of a trusted source for health information, HealthInfo has seen huge growth over the past five years.

HealthInfo is the trusted website Canterbury clinicians refer their patients to for health information – the number of page views has grown from around 10,000 per quarter in 2011 to 160,000 views a quarter this year.

It’s encouraging to see that HealthInfo is being used as it was intended – as a place where people can easily navigate and find trusted, high quality health information that is specific to Canterbury.

Whether it’s tips on improving your own health, or more info on a medical condition you or a member of your family may have, or details about medications, HealthInfo is a mine of credible, easy to read information.

HealthInfo also has a lot of other topical, general health information that anyone can read about, from heart attack risk, to managing fatigue – it really is a brilliant resource for everyone in Canterbury. The HealthInfo site has also been shared and personalised in other DHBs. Check out [www.healthinfo.org.nz](http://www.healthinfo.org.nz)



**David Meates**  
CEO Canterbury District Health Board

## Facilities Fast Facts

### Fast Facts - Christchurch

Last week, anaesthetist and keen photographer Mark Waddington took these fantastic photos during a helicopter flyover of the Acute Services building site.



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Back on the ground, the first glazing and louvre panels have been attached to the building, at the northwestern corner (top middle of the picture below, taken from Hagley Park). The steel framing of the western tower is now complete. Multiple small concrete pours are planned over the next months to create the floors within the building.

## Fast Facts - Outpatients

Piling work on the Outpatients site is now over halfway through, and excavation of the site has begun. This part of the work is on track to be completed after Christmas.

Parking update: Enabling work on the Metro Sports complex means that from Monday 7 November there will be reduced on-street parking both on Stewart Street and on Balfour Terrace.



## Time for staff to consider a different way to get to work?

With summer around the corner and the approaches to Christchurch Hospital increasingly coned, congested and under construction, perhaps it's time to consider an alternative to your daily drive to work?

A few months ago we ran a survey of staff at the Christchurch Hospital campus. One of the most surprising statistics to emerge was that most staff journeys to work are around 6 km or less.

We also know that if staff tried a different way to get to work just once a week, it would make a huge difference to the congestion we are currently experiencing close to the hospital.

Of course, commuting by bike or bus isn't for everyone, and is difficult for shift workers who start or finish late. But if you are a CDHB nine-to-fiver and it's a bright sunny day, perhaps you might think about a different way to get to work?

For example, instead of leaving home an hour early to grab one of the increasingly scarce parking spaces, why not park a kilometre further from the hospital and bike, scoot or walk the rest of the way?

Daytime staff can park at our Deans Ave Park & Ride car park for \$5 a day, and walk (or scoot or bike) across the park (it takes about 20 minutes to walk). If you use this option, please park beyond the area marked as CDHB-specific parking – that's for hospital patients and visitors. Also please note that the shuttle service is for patients and visitors, not staff.

There's plenty of cycle parking at the hospital, including the swipe-access staff car parking building on Antigua Street.

Information about buses, including timetables and real-time bus data, is available at [metroinfo.co.nz](http://metroinfo.co.nz) – and there's a free app for your phone too.



## Bouquets

### Ward 11, Christchurch Hospital

I just want to applaud your staff in ward 11 for their incredible kindness and support. Last week I needed emergency surgery and as this was my first operation/hospital visit I was rather anxious. When I was wheeled to the operating theatre I was constantly reassured and comforted. Back in the ward later I was looked after very well and made comfortable and painfree. A real "no worries attitude" which made a huge difference to me. Thank you.

### Ward 11, Christchurch Hospital

Absolutely positive in all respects. The standard of care by the nursing staff is top quality. They treated me as an individual, always most respectful and fulfil their duties in a very professional manner. The meals were of a good standard as well. Two years ago I received radiation treatment (39 in total) at this hospital for prostate cancer and was the recipient of the most excellent standard of care from my specialist Dr Melissa James, right through to all the wonderful radiation team. The outcome is that I am all clear thanks to a team effort by all associated within the Oncology department. Also had angioplasty in 2003, again successful. Fantastic. Thank you.

### Christchurch Hospital

I would like to congratulate your board on the organisational skills of your team. From the efficient and caring ambulance staff, the nurses in general and the very caring, charming nurses in the x-ray department and special mention of the doctor who attended me. He was very informative in his explanation and diagnosis and most attentive. I cannot speak highly enough of the staff who I

was most fortunate to have attend me. Congratulations once again and my sincere thank you for your wonderful hospital.

### Christchurch Hospital, Ward 19

A nurse called Vicky on Ward 19 would have to be the best nurse ever! She works night shift.

### Christchurch Hospital, Gastro Day Ward

I arrived extremely nervous of the procedure. Nurses and doctors were so very reassuring and just very kind and lovely. The care was fantastic. So very pleased with results. Many thank yous!. P.S I could even do this again!

### Christchurch Hospital Surgical/ Theatre

I would like to thank Laura Singleton and her surgical team for making me feel at ease before and after my surgery. They ensured I was fully informed as to the procedure of my surgery and gave me respect and spoke to me in clear and concise language. I could easily understand what was going to happen in regards to my surgery. I would appreciate it if they could be acknowledged for their efforts in allowing me to make informed decisions regarding my treatment.

### Christchurch Hospital, Emergency Department

I appreciate the support and understanding and caring interaction I received from Julie in the Emergency Department (ED) on Friday 28 October. Julie was very empathetic towards the pain I had and was able to reassure me about what was going on regarding my treatment. At all times she was professional and told me what was

happening before events occurred. I believe she is brilliant at her work and she should be recognised for her efforts. She made my stay a positive experience.

### Christchurch Hospital, Ward 18

I would like to have the opportunity to take the time to acknowledge and appreciate the following people who have made my time as a patient on this ward a pleasant, professional and informative environment: Maria, Simon, Antonia and Alfonsza. They all had a sense of humour, explained what was happening to me in clear, concise language I could understand. They were culturally sensitive towards myself and my partner. I felt respected at all times and would highly recommend them for their professionalism.

### Christchurch Hospital, Medical Day Unit

During this visit to support my husband I couldn't help but notice that every one of the staff were professionally dressed (smart, neat, tidy – so was the ward room). The staff's easy, bright manners gives a warm feeling to us sitting on chairs – patients and support family. The staff certainly had no down time, they were both busy and efficient and everyone was given individual care with a smile. Please pass my message on to David Meates and those who should know, you are running a very caring Medical Day Ward with patients receiving loving care, from the receptionist, right through the visit until we leave.

# A bit more comfort for patients in Nephrology

Timaru man Jim Scott gets a buzz from the fact he helped get seven new therapy chairs for Christchurch Hospital's Nephrology Department.

Jim was admitted to the Nephrology Department for 16 weeks of haemodialysis training from June to September this year. The second week in he asked Wendy Cuthill, Nephrology Charge Nurse Manager, was there anything the department needed to make it better for patients.

Wendy replied "off the cuff" that they really needed new chairs, not expecting that would be possible.

"I was actually about to put a capex request through to get two new chairs per year for the next four years – but at around \$7500 per chair – it wasn't guaranteed," Wendy says.

"But Jim said to leave it with him."

Within a few weeks Jim had organised a special donation from a friend, who would like to remain anonymous, of \$50,000.

He had also found Bionic therapy chairs made by a German company called TEKMED. The next step was involving the Christchurch Kidney Society who facilitated the financial side of the transaction to purchase the chairs.

Seven chairs were purchased in all and already they're making

a huge difference to patient comfort, Wendy says.

"This has just helped us tremendously," Wendy says.

"It was so kind (of Jim's friend). We never thought we would get a donation like it. It really has lifted everyone's spirits because we've been really busy this year".

Jim says he's thrilled to have been able to help, even though he never really got to test out a chair for himself.

"I never got to use one. They arrived the day I went home."

Despite not getting to test one out Jim says he's still happy with the result and the difference it is making to other patients.

"I really get a buzz out of it. And I know my friend who donated the money towards them, gets a buzz too," Jim says.

Antonio Mangioni, who has experienced both the old and the new chairs while receiving haemodialysis training, says the chairs are wonderful.

"There's no comparison between the old and new chairs. These new chairs are just lovely," Antonio says.



Above: Wendy Cuthill CNS Nephrology, Jim Scott, Jo Houghton manager Christchurch Kidney Society and Antonio Mangioni (patient)

# The importance of kindness in healthcare

How kindness can influence culture is the subject of Tim Keogh's talk at the Grand Round on Friday November 18th.

A partner at UK Consulting firm, April Strategy, Tim was a key note speaker at the Asia Pacific (APAC) Forum on Quality Improvement in Healthcare and has been visiting New Zealand doing work for the Blood Service and Southern DHB on culture.

Tim works with high-profile commercial and healthcare organisations around the world, to create customer-focused culture, improving customer / patient experience and nurturing engaged and happy teams.

His mission is to spread kindness in healthcare, because evidence shows that kinder healthcare is safer, higher quality and costs less. He has worked across 40 healthcare organisations in the United Kingdom, United States, and New Zealand, to create values-driven cultures, transforming team-working and patient experience.

Tim's work combines the latest thinking in neuroscience, organisational psychology and behavioural economics to engage healthcare staff in practical changes they can make themselves; and sustain them with organisation-wide programmes to support culture change

His background includes consumer advertising, customer experience design (through people and technology), and culture change. Tim's passion is helping people and organisations to build the positivity, skills and resilience to be the best they can be.



Tim Keogh

## Winners of Opioid Survey - Ward 28

Congratulations to staff on ward 28 who had the highest percentage of staff enter the Opioid Survey.

As a follow up to the Opioid Collaborative work with the Health Quality and Safety Commission (HQSC) the CDHB project team ran an 'Opioid Awareness' month in September with clinical pharmacists and nurse educators working together to provide short and snappy education sessions at handover.

A survey monkey survey was available to test knowledge gained. There were over 500 participants from across the CDHB.

Congratulations to ward 28 who had 42 per cent of staff take part. A special mention to Kaikoura Hospital who had a number of participants and the education session hadn't got out to them yet.



Left: Ward 28 about to enjoy their winning chocolate cake.

# Displays show staff commitment to Patient Safety Week

Last week was New Zealand's national "Let's Talk" Patient Safety Week, coordinated by the Health Quality & Safety Commission.

Patient Safety Week is our Health System's collective commitment to consumers and patients that we continue to strive towards providing the best and safest care possible, every time.

Director Quality and Safety, Susan Wood, says that although patient safety is our number one priority all year round, Patient Safety Week is an added opportunity for Canterbury health professionals to focus efforts on achieving the goal of zero harm.

Patient Safety Week was highlighted around CDHB with colourful displays marking the week at Maternity Services and in the main foyer at Christchurch Hospital, and by some excellent work from the Speech Language Therapy team.

## Maternity

Christchurch Women's Hospital (Birthing Suite, Maternity Suite and Women's Outpatients) all have Patient Safety Week board displays. In the Maternity and Birthing Suites the focus was on encouraging and enabling appropriate Safety 1st incident reporting with a plan to regularly highlight different aspects of Safety 1st and provide a platform for follow up discussion.

The Maternity Weekly News Slideshow, which is emailed to all staff and forms a basis for all shift handovers has included Patient Safety Week slides with a similar emphasis on Safety 1st reporting and its significant role in patient safety.



## Pharmacy

Pharmacy too wanted to celebrate what they are doing that fits under the 'Let's Talk' theme and have produced a colourful display near the ATMs on the ground floor of Christchurch Hospital.

Patient safety week is an important reminder of what the pharmacy service can offer patients to help reduce medication related harm. The "let's talk" theme has allowed the pharmacy department to make the service more visible.

Pharmacy plays an important role in providing medication education to empower patients to understand and use their medications effectively. Our cardiology team has worked hard to create group education for people taking dabigatran, a drug that reduces the risk of a heart attack or stroke.

Pharmacy's poster also mentions drop-in 'ask the pharmacist' sessions, particularly suitable for mental health patients on medication to help manage their condition. There is even a game that helps make education fun for children and young people about complex health conditions like cystic fibrosis.

If you have a medication question make sure you can drop in and ask your pharmacist for advice to help manage your condition.



## Speech, Language and Therapy

The Speech, Language and Therapy team have also produced a non-nonsense poster, aimed at staff this time. Their advice is specifically about communicating better with patients.

On their poster, the SLT service assert that communication breakdown is behind over 80% of complaints and errors that occur in our health system, and state that for patients who live with a communication disability, this presents a significantly increased risk.

SLT give 10 top tips for communication. Their poster is included in this CEO Update on page 15 so that you can see them all.

# Donation to Child Health

## A big thanks to The Warehouse for the recent donation of \$41,000.

Child Health Service Manager, Anne Morgan, Team leader of the Play Specialist Service, Allie Bower, and Play Specialist, Rebecca Pilbrough, attended a recent cheque presentation at The Warehouse's headquarters on Blenheim Road.

The Warehouse team ran a fundraiser earlier this year called the Dollar Drop Campaign. Shoppers in all Canterbury, South Canterbury and West Coast stores, were asked if they would like to donate an extra \$1 towards fundraising for Christchurch Hospital's children's ward.

Proceeds from the donation are going towards purchasing sensory equipment to be used by the Play Specialist team with children on the surgical, medical and Child Health Oncology Centre children's wards. The original amount requested was half of the amount actually raised.

"This donation exceeded our expectations. We are thrilled we have the full funds to purchase the sensory equipment and have funds left over. The extra funds will help maintain our Play with a Purpose packs that go to children who are inpatients in hospital," says Allie.

"We are delighted to have such a wonderful relationship with The Warehouse and all that they do for us as part of their ongoing community work."

Thank-you The Warehouse from all of Child health, Allie says.



## Breathe Better

The Canterbury Better Breathing Programme helps hundreds of people every year to live full lives despite a respiratory condition.

Better Breathing is a pulmonary rehabilitation programme offered free in the community.

The programmes include free education and exercise sessions that are offered in a safe and supportive environment. They are designed to equip people with respiratory conditions like COPD to manage their condition and live a full life.

Programmes are planned in 2017 for North New Brighton, Papanui, Ashburton, Barrington, West City, Rangiora and Aranui.

Speak to your GP team about whether the programme is right for you.

[Click here](#) to view the 2017 schedule

For more information or to refer email [catherine.harrison@ccn.health.nz](mailto:catherine.harrison@ccn.health.nz)



Canterbury  
Better Breathing  
Pulmonary Rehabilitation Programme

# Visitor parking at Pegasus House

All Pegasus, Canterbury Clinical Network and Canterbury Community Pharmacy Group staff formerly at 160 Bealey Avenue have now relocated to Pegasus House at 401 Madras Street (off Dollans Lane).

Construction work will continue on the site until early next year, making it very important for visitors to know where to park. All Pegasus House visitor parking is at the furthest end of the site – see map below.

## Pegasus House Car parking plan

Covered bike stands

Visitor car and motorcycle parks

Parking at Pegasus House will be challenging during the next six months while construction continues. This plan shows visitor parking (blue and purple) Please allow extra time when travelling and consider parking on the street.



If you are coming to visit, attend a meeting or training course please allow a little extra time and consider parking on the street. Also please take extra care while making your way through the carpark to the temporary main entrance at the rear of the building. This entrance is sign posted – follow the arrows.

Thank you for your patience while we complete the transition to our new home.



# First of its kind Heart Failure Collaborative Study Highlights Success in Asian Populations

Asians suffering from heart failure present 10 years younger than people in the West according to initial findings of a first of its kind collaborative study between the Christchurch Heart Institute and the National University Heart Centre Singapore.

A blood test, discovered and developed by the Christchurch Heart Institute (CHI), is at the centre of the research which looks at the likelihood of heart failure in Asians compared with Westerners. Results show Asian residents suffer heart failure at an average of 60 years old, compared to 70 years old in the non-Asian Christchurch study group.

Heart failure is a weakening of the heart that reduces blood supply to the body, causing fatigue and shortness of breath with high rates of disability and death.

“NT-proBNP is a hormone released by the heart into the blood stream in markedly increased amounts when the heart is under stress. It was discovered in 1995 by the team at the Christchurch Heart Institute and is a helpful indicator of heart failure,” said Professor Mark Richards, Director of the Christchurch Heart Institute, a University of Otago Centre of Research Excellence based at Christchurch Hospital. He is also Director of the Cardiovascular Research Institute of Singapore.

“The test itself worked more accurately in the Asian group accurately indicating the presence or absence of heart failure more than 10 times more often per 100 patients compared

with Western patients. This probably reflects their relative youth compared with Western patients. The earlier age of onset of heart failure in Asia is not fully explained but is confirmed by observations in multiple countries throughout Asia. Risk factors such as high rates of diabetes and smoking are likely to be relevant,” Professor Richards said.

Despite the accuracy of the test in Asian people, heart patients in the West can also rely on it as the most exact method of identifying acute heart failure and distinguishing this serious condition from other causes of severe breathlessness.

“Heart patients in New Zealand, the UK, Europe and America have had access to this test for many years. The news that the same test is probably superior in Asian populations, living in all Asian countries, provides the opportunity for improving heart failure management. Asian doctors can have faith in this blood test, but the lack of funding and education about the test is slowing progress of its use.”

According to Professor Richards, the earlier heart failure is diagnosed the more promptly correct treatment can begin which translates into less time in hospital and better outcomes for heart failure patients.

The Christchurch/Singapore study findings have just been published in the European Journal of Heart Failure.



## Christchurch Heart Institute A University of Otago Centre of Research Excellence

The Christchurch Heart Institute (CHI) is a University of Otago Centre of Research Excellence. The CHI undertakes significant research into heart hormones and other heart regulators that affect circulation and heart health. The team's findings improve the lives and health of people at risk of, or suffering from, cardiovascular disease.



## Cardiovascular Research Institute (CVRI)

The Cardiovascular Research Institute of Singapore (CVRI) based at NUHS has the primary objective of tackling cardiovascular disease through laboratory based research, clinical research, clinical trials, health services research, prevention and epidemiology research. CVRI collaborates with international centres for multinational, multicentre basic and clinical trials. We are also involved in outcomes-related research, setting standards for evidence-based best medical practice in Singapore.

# NZ Speech Language Therapist's Association supporting Patient Safety Week

The New Zealand Speech Language Therapist's Association would like to show their support for Patient Safety Week 2016 "Let's Talk" October 30-November 5

Communication breakdown is behind over 80% of complaints and errors that occur in our health system.

For those patients who live with a communication disability, this presents an increased risk.

Communication Access is a simple concept that looks at reducing barriers to communication breakdown.

You can improve your patient's experience in healthcare by following these 10 top tips for communication.

- 1 Introduce yourself- Show your name on your name badge.
- 2 Speak to the patient directly, not always to their support person.
- 3 Speak a little slower.
- 4 Allow them more time to get their message across.
- 5 Give one piece of information at a time.
- 6 Write down key information.
- 7 Utilise pictures and communication aids a person may have with them.
- 8 Ask questions that can be answered with a yes or no.
- 9 Draw a diagram.
- 10 Clarify you have understood their message.

For more information please contact  
[communications@speechtherapy.org.nz](mailto:communications@speechtherapy.org.nz)



## Department of Psychological Medicine University of Otago, Christchurch And the Specialist Mental Health Service Canterbury DHB Clinical Meeting

Tuesday 8 November 2016

12:30 pm – 1:30 pm

Venue: Beaven Lecture Theatre,

7th Floor, School of Medicine Building

Title: Adverse events after Te Awakura became unlocked and Activation therapy for inpatients

Abstract: This talk will present data on two recent inpatient studies. The first describes adverse events after Pipiri was unlocked and the second describes Activation therapy for depressed inpatients.

Presenter: Dr Ben Beaglehole

Chair: Dr Steve Duffy

Special notes:

These meetings will be held on a weekly basis (except during school holidays).

- » A light lunch will be served at the School of Medicine venue from 12 noon.
- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites:
  - » For PMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at PMH.
  - » For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital
  - » The dial in address is: Psych Med Grand Round.
  - » If you have difficulties dialling in please call 0800 835 363 to be connected.

# Staff Wellbeing Programme



## Staff Wellbeing Workshops at Burwood: CDHB Wellbeing Presentation

### Wellbeing Workshops

**Last chance! If you have been meaning to attend one of the workshops and haven't, you are running out of opportunities!**

#### Burwood is hosting the last Character Strengths Workshop:

» Monday 14 November. Last chance for 2016! Available to managers / supervisors. [Click here](#) for more information and [click here](#) to register.

» Participant comment ... "Thank you for the opportunity to participate in this course I value the sharing and the preparation that obviously went into the planning. I also liked the fact that there was scientific backing to the content."

#### Burwood is hosting the last Wellbeing Workshop:

» Monday 14 November at Burwood. [Click here](#) for more information and [click here](#) to register, available to all staff.

» Participant comment ... "I thoroughly enjoyed this course and got a lot out of it. I will use what I learnt in my professional and personal life. Thank you."

Be in quick - last chance to attend! Limited places in the last two workshops. Don't miss out register now to ensure your place.

#### CDHB Wellbeing Presentation - Dr Caroline Bell & Ciaran Fox

Last year we ran this successful presentation. We would like to share it with you for an early before the busy festive seasons begins. It is a good opportunity to learn about the importance of taking care of ourselves. [Click here](#) to view presentation notes or email this link to yourself and watch at home <https://youtu.be/5KDHWF-qIXY>

For more information please contact Lee Tuki, [lee.tuki@cdhb.health.nz](mailto:lee.tuki@cdhb.health.nz) or extension 82855

Staff Wellbeing, Canterbury and West Coast District Health Boards

## The NZNO Cancer Nurses College Conference is coming to Christchurch in May 2017!

Our conference theme 'Cancer Nursing Under Construction' is a reflection of what is happening in Christchurch after the 2010-2011 Canterbury earthquakes. Canterbury is focused on improvisation, rejuvenation and innovation to rebuild the environment and improve the wellbeing of Cantabrians. Cancer Nursing within New Zealand is developing its own identity and evolving as a specialty. As cancer nurses we are influenced by improvisation, rejuvenation and innovation in research, clinical practice and developing technologies to provide high standards of care to people living with cancer.

The 'Cancer Nursing Under Construction' conference offers a variety of sessions with the aim of providing you, as a health professional involved in care of people living with cancer, tools to fill your cancer care toolbox. Delegates will be enriched with novice to expert classes, plenaries and concurrent speakers through education, research, technology, community and wellness topics. The conference will enable delegates to explore their cancer knowledge, strengthen clinical skills and resources for the future development of cancer care in New Zealand.

Visit our [website](#) for full conference information, including a preliminary programme.

### Call for abstracts

This biennial event for cancer nurses is an opportunity to showcase the passionate work undertaken by nurses working with people with cancer. We invite you to submit abstracts for oral presentation or posters on the following themes: education, technology, research, wellness and community care/hospital in the home.

The closing date for submissions is Friday 3 February 2017.

For full details please visit the [website](#).

### Registration is open!

Be sure to get in quick to secure early bird rates and nearby accommodation.

Visit the [website](#) for more information and to register.

Cancer Nursing NZ  
**Under Construct**  **on**  
 11-13 May 2017 Christchurch

# One minute with... **Eli Chitaka,** **Senior Service Support Technician**

## What does your job involve?

The Technical Support team provides predominately deskside support for computers, printers and an ever increasing list of related software and devices.

A big part of our function is to translate requirements into simple technical language and enable both Information Services Group (ISG) and business staff to fulfil requests as quickly as possible.

My position of Senior Tech involves coaching, supporting and coordinating the technicians, working in with the team leader. I draw a lot of satisfaction from enabling others to do their job so acting as a technical escalation point in the team is very rewarding. Over the years here, I've led a team of technicians upgrading PCs to Windows 7, coordinated the Virtual Desktop Infrastructure rollout, been heavily involved in Burwood Hospital facility planning, advised on devices for eMeds and responded to support requests at our 40-plus CDHB locations. The technical support team provides after hours support seven days a week so if you call at 3am I might be the one that wakes up to help you.

## Why did you choose to work in this field?

I think it chose me as I was deeply captured by computers before I even began seriously thinking about what I would do for a living. The geeky side of technology largely drew me into this field but ultimately I have stayed because of the social and aspirational aspects of technology enablement. Advances in technology and services provide value to staff and those they care for which sustains my enthusiasm in the face of regular systems errors and support tickets!

## What do you like about it?

The mental challenge and constant change that is part of everyday work in Information Technology. Add to that the opportunity presented by the future advances our field has yet to make in terms of technology improvements and finding ways to maximise the people side of Information Technology (IT).

## What are the challenging bits?

Finding my way to the source of technical issues and thinking quickly on my feet to minimise disruption and complexity for staff who are our customers. We often receive very short notice when we need to assist with moves or implement new technology, often acting as an interface for various teams which makes things fun.

## Who inspires you at work and why?

Over the years I've had the opportunity to work with many impressive professionals here. These are some who I've worked closely with... Technically, Mart Gerrits is an exceptional systems engineer. Keith Hawker has a depth of experience and genuine care that has challenged me to keep growing in my skills and character. Mike de Ruiter has an amazing ability to articulate and work with a seemingly endless volume of detail on facilities projects like Burwood Hospital and the Acute Services Building.

## What do Canterbury DHB's values (Care and respect for others, Integrity in all we do and Responsibility for outcomes) mean to you in your role?

I think on a practical level it means constantly thinking how my actions or inaction will affect colleagues, staff and patients. Information technology is incredibly complex and unpredictable at times so one of the challenges we have as IT support professionals is to follow through on what we say we will deliver to customers and be ready to own areas for improvement, while at the same time showing compassion and genuine appreciation for the impact of delays and issues.

## The last book I enjoyed was...

'Reinventing organisations', by Frederic Laloux. I think this represents a window into the future of organisational culture and structure, along with current real world examples which include health organisations. Exciting and challenging reading.

## If I could be anywhere in the world right now it would be...

Zimbabwe with family enjoying summer barbecues and events on a weekly basis, but then I'd be missing time with my family here so I would love to be in two places at once!

## My ultimate Sunday would involve...

Great coffee at a café we haven't visited. Time spent in the garden with my two year old son who loves to help, after a fashion. A breather while he sleeps to read an inspirational book. Then off to the playground to tire him out before dinner. Then a good movie with my wife in the evening. Icing on the cake would be if Monday was a public holiday.

## One food I really like is...

Peanut butter chicken, sadza, beans and spinach.

## My favourite music is...

So many possibilities... Electronica... lookup MrSuicideSheep channel on YouTube.



Above: Eli Chitaka

If you would like to take part in this column or would like to nominate someone please contact [Naomi.Gilling@cdhb.health.nz](mailto:Naomi.Gilling@cdhb.health.nz).

## In brief

### Dementia Canterbury Community Education Seminar 16 November 2016 - Evening

For adult children of people with dementia

Find out more about the impact of dementia on families, including changing roles and managing conflicts, plus a word on genetic inheritance and dementia

Dr Matthew Croucher, Consultant Psychiatrist, Older Persons Mental Health, will discuss these common queries that face us when a parent (or other close relative) develops a dementia whether the relative lives in Canterbury or elsewhere. There will be time for questions.

- » Date: Wednesday 16 November 2016
- » Time: 7.30 pm – 9.00 pm
- » Venue: Aspire Hall (across the courtyard from the Dementia Canterbury office), 314 Worcester Street, Linwood, (Between Fitzgerald Ave & Stanmore Rd)

If you or others wish to attend contact:  
**Karen Bell, Administrator/Receptionist**  
 Dementia Canterbury  
 P 03 379 2590 / Freephone 0800 444 776  
[www.dementiacanterbury.org.nz](http://www.dementiacanterbury.org.nz)

We've looked at 55,259 applications in 2016, recruiting a total of 1,598 fantastic employees in 2016.

It's been a busy year for the Recruitment team and we thank you for your support.

We will be taking time during the Christmas and New Year holiday period to unwind, as we hope you do too.

We will be on skeleton staff during this time. Get your requests through early, or contact a specialist today for a chat.

Happy Holidays!

The Recruitment Team.



# ANEC 2017

AUSTRALASIAN NURSE EDUCATOR CONFERENCE

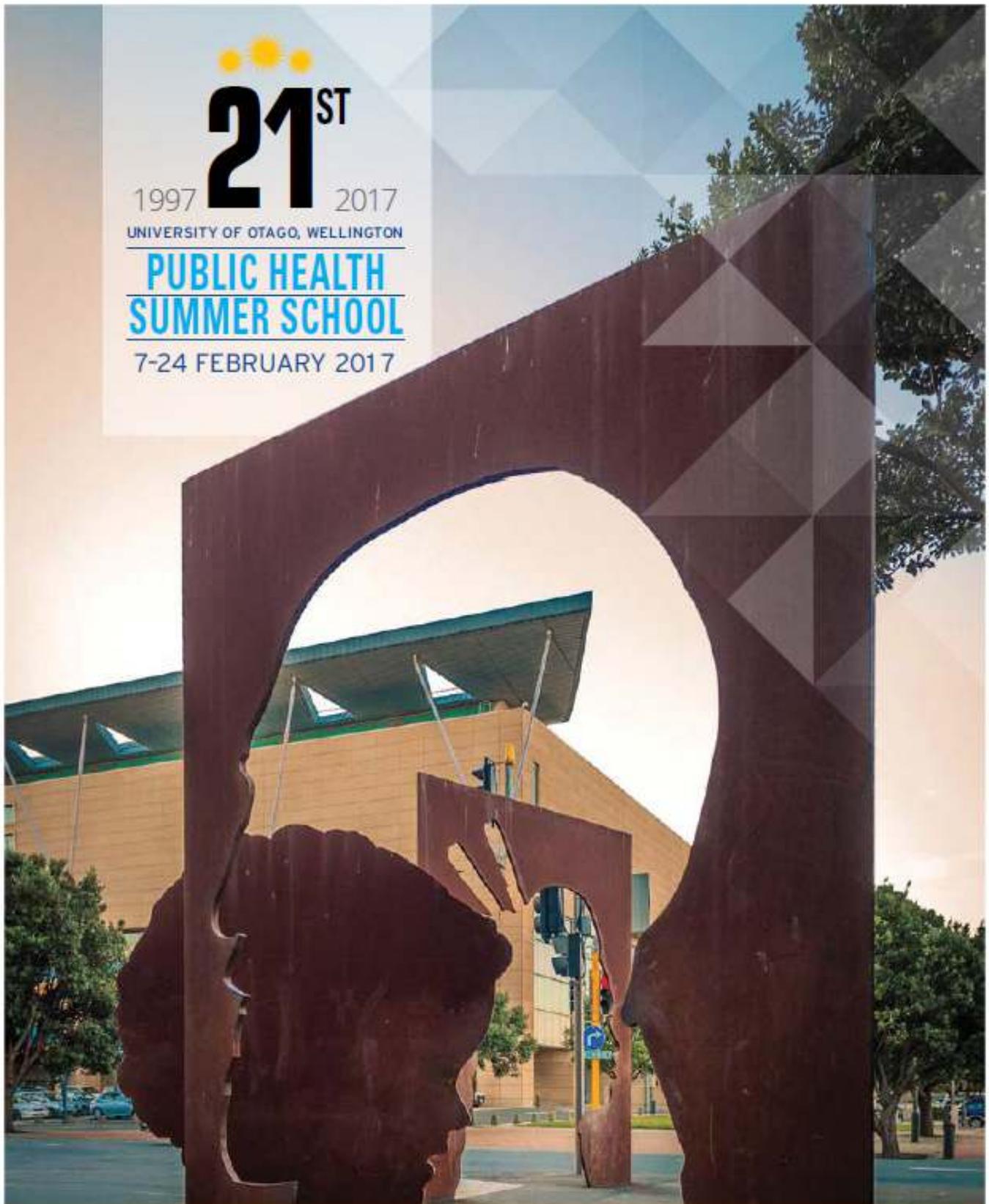
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Visit [www.anec.ac.nz](http://www.anec.ac.nz) for more information – registrations are open

We look forward to seeing you there...

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